



## Arm Gaiter Order Form Made-to-measure

All fields are required in order to process your order

### Order Details

Date: \_\_\_\_\_  
Order No.: \_\_\_\_\_  
Contact Name: \_\_\_\_\_  
Contact Phone No.: \_\_\_\_\_  
Email: \_\_\_\_\_  
Hospital/Clinic: \_\_\_\_\_  
Delivery Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Post Code: \_\_\_\_\_

### Specifications

Arm: ☐ Left ☐ Right  
Style: ☐ KNS08 Extension ☐ KNS08F Flexion\*

\* Please indicate degree of flexion required: \_\_\_\_\_  
Flexion is available in increments of 5 degrees, beginning at zero.  
Incorrectly supplied flexion angles will automatically be rounded up or down to the nearest 5 degrees.

Lining: ☐ Cotton ☐ Towelling & Foam Padded (chargeable)

Straight steels: ☐ 2 ☐ 3 ☐ 4

Please note: Flexion gaiters are supplied with 2 flexion steels

### Fabrics

☐ Bumblebee ☐ Camouflage ☐ Dinosaurs  
☐ Hearts & Flowers ☐ Mint Butterflies ☐ Rainbow Unicorns  
☐ Urban Camo ☐ Denim ☐ Claret  
☐ Black

### Circumference Measurements



A	Proximal circumference	
B	Distal circumference	

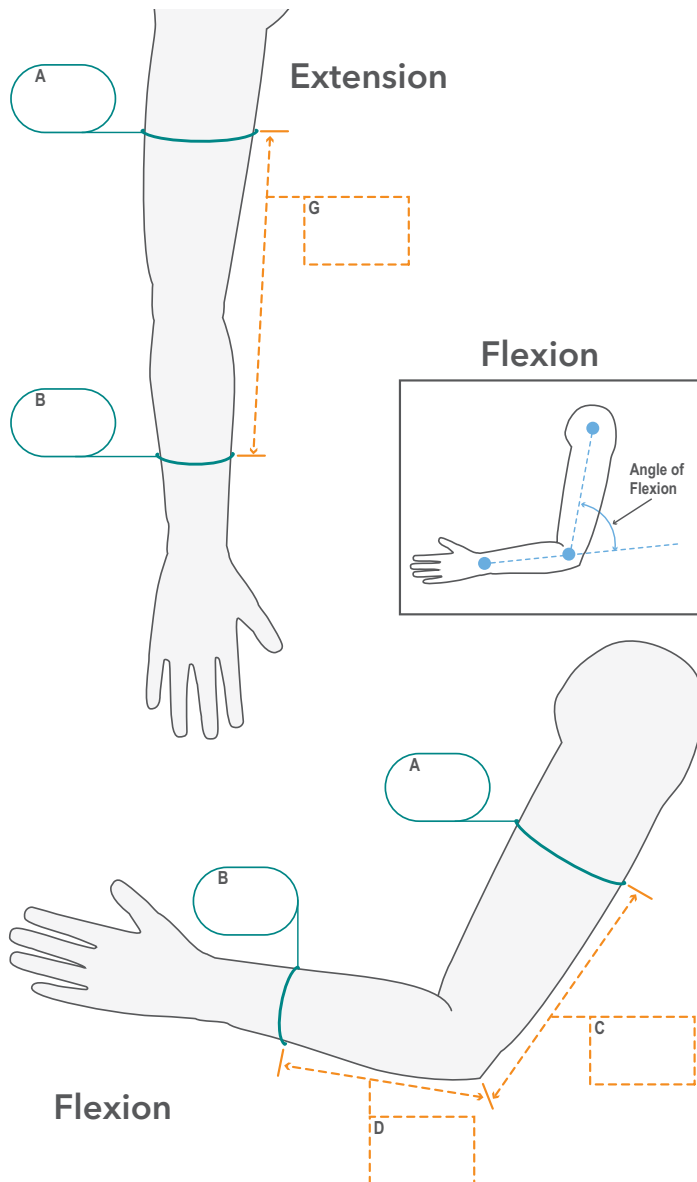
### Depth Measurements

(cm)

C	Proximal end to elbow joint (Measure Posterior surface)	
D	Distal end to elbow joint (Measure Posterior surface)	
G	Total length of gaiter (Measure Medial Border)	

### Patient Details

Patient Reference No.: \_\_\_\_\_  
First Name: \_\_\_\_\_  
Surname: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_



### Specific Instructions

When completed, please click: [thrive@wellandable.com.au](mailto:thrive@wellandable.com.au) to email your electronic order form